



**MISSOURI DIVISION OF FIRE SAFETY  
AMUSEMENT RIDE SAFETY  
ITINERARY REPORT**

Missouri Division of Fire Safety  
Amusement Ride Safety Unit  
P.O. Box 844  
Jefferson City, MO 65102  
800-877-5688

PLEASE TYPE OR PRINT

<b>GENERAL INFORMATION</b>	
OWNER / BUSINESS NAME	PAGE <b>1 OF</b> _____
ADDRESS	PHONE
CITY, STATE, ZIP	E-MAIL ADDRESS
<b>Amusement ride/attraction owners or operators must file with the Department this itinerary of scheduled operation dates and locations no less than 15 days prior to operation of ride or attraction for use by the public in Missouri. Failure to do so will subject such owner or operator to the penalty as provided by law. RETURN FORM TO ADDRESS LISTED ABOVE.</b>	
<b>TRAVELING SHOW ITINERARY</b>	
EVENT SPONSOR	EVENT SPONSOR
SITE OF EVENT (STREET)	SITE OF EVENT (STREET)
CITY / COUNTY / ZIP	CITY / COUNTY / ZIP
CONTACT PERSON	CONTACT PERSON
PHONE	PHONE
SET-UP DATE	SET-UP DATE
DATES OPEN TO PUBLIC	DATES OPEN TO PUBLIC
EVENT SPONSOR	EVENT SPONSOR
SITE OF EVENT (STREET)	SITE OF EVENT (STREET)
CITY / COUNTY / ZIP	CITY / COUNTY / ZIP
CONTACT PERSON	CONTACT PERSON
PHONE	PHONE
SET-UP DATE	SET-UP DATE
DATES OPEN TO PUBLIC	DATES OPEN TO PUBLIC

ATTACH ADDITIONAL PAGES IF NECESSARY



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**(CONTINUED)**

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